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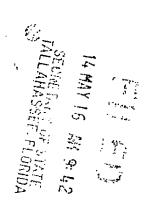
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COVER LETTER

Division of Corporations
SUBJECT: Tasty's Restaurant and lounge LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Marion Walker Name of Person
Crystals talace LLC.
3301 NE 3 Rd AVE
Dakland Pack FL 33334 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Marion Walker at (954) 300 9270 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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Name of the Limited Liability Companied Limited Limite	ant and Lounge C
(A Florida Limited L	nability Company)
The Articles of Organization for this Limited Liability Company	were filed on 05.01-2014 and assigned
Florida document number 114000070445.	
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liab</u>	lity company here:
Crystals Palace The new name must be distinguishable and end with the words "Limited Liab	Restaurant and Lounge
The new name must be distinguishable and end with the words "Limited Liab	
Enter new principal offices address, if applicable:	3301 NE 3rd Avenue
(Principal office address MUST BE A STREET ADDRESS)	Oakland Park FL 33334
Enter new mailing address, if applicable:	Caystal's Palace
(Mailing address MAY BE A POST OFFICE BOX)	330 NE. 3Rd AVENUE
	Oakland Park FL 33334
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
Name of New Registered Agent:	
New Registered Office Address:	CO C
	Enter Florida street address
	, Florida

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

New Registered Agent's Signature, if changing Registered Agent:

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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ne date this document is filed by the Florida		(optional) nnot be more than 90 days after
Ffective date, if other than the date are effective date must be specific, cannot be no date this document is filed by the Florida ated 05-16-		

Page 3 of 3

Filing Fee: \$25.00

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